LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

Instructions

- Print in ink or type.
- Complete form and return with \$110 registration for to the Board of Pthics, 2415 Quail Dr., 3th Ploor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a
 lobbyist or (2) first action requiring registration. Registrations empire as of
 December 31 unless a renewal is submitted between December 1 and January
 31.

(d) whether or not the client or someone else pays you to lobby.

Does this person pay you? VES

If No, who pays you?__

1. NAME Klein DR	ter Sharon First	<u></u>	1	050071
2. BUSINESSPHONE	225 930 2 Area Code and Phone Number	212		
3. BUSINESS ADDRESS	7401 Flor La Blud Street and No.	1. Paren Ronge	LA 7	D ₹O.C. ir
MAILING ADDRESS	Street and No.	City	State 2	(ip
4. EMPLOYER Cay	Communication	5		
5. EMPLOYER'S ADDRESS	s 7401 Florida B	Hud Beter Rouge	e μΑ 7080 Zip	<u> </u>
6. LIST BELOW (a) Names	of persons, groups, or organizatio	ns which you represent; (b) the address of es	ich such person, group, or

Business or purpose cable tele communications

organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group;

HAND DELIVERED

FOR OFFICE USE ONLY Postmark Date: 0127105

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LOBBYING REGISTRATION FORM



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A	ddr ess
B	usiness or purpose
D	oes this person pay you?
15	f No, who pays you?
3. N	Name
1	Address
-	Business or purpose
]	Does this person pay you?
	If No, who pays you?
4,	Name
	Address
	Business or purpose
	Does this person pay you?
	If No, who pays you?

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.